## MISSOURI WATER AND WASTEWATER PROJECT PROPOSAL

Please note: Proposal Form must be completed in full to be considered by committee.

1. Identification Information (City, County, Water District, Sewer District):	(List others, if joint application.)			
a) Name:				
b) Mailing Address:				
c) City, State, & Zip:				
d) Chief Official:	Title:			
e) Contact Person:	Title:			
f) Telephone Number:				
2. Proposal Preparer (if different than contact person stated above):				
a) Name:	Title:			
b) Name of Agency:				
c) Mailing Address:				
d) City, State, & Zip:				
e) Telephone Number:				
3. Other Information (for reporting purposes):				
a) Population of project service area or				
district/jurisdiction (use 2000 census if available):				
b) Median Household Income (use 2000 census if available; if district, use county income):				
c) State Representative District No.: d) State Senat	or District No:			
4. Funding Programs Considered (Please check all that apply and fill in dollar amounts):				
DNR – Clean Water SRF: \$ USDA – Rura				
DNR – Drinking Water SRF: \$ USDA – Rura	· -			
DNR – Rural Water Grant: \$ DED – CDBC	· -			
DNR – Rural Sewer Grant: \$	· -			
DNR – 40% Grant: \$				
5. Bond Issues				
	what is the amount? \$			
in just	eneral Obligation bond			
b) What type of bond issue was passed? Revenue bond Geco Please submit copy of ballot language with this proposal form, if bond has been proposal form.				
	en will it be on the ballot?			
as there are intention to pass a bond.	ere existing bonds? Yes No			
,	ere existing bonds?			
g) What is the debt service on existing bonds?				
6. Completely describe project need, impact, and proposed actions to address need (attach page, if necessary):				

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7. Project Type:			
☐ Water ☐ Wast	ewater		
8. User Charge Information (must complete for both system	ms):		
Do you have separate water and wastewater accounts?	WATER	☐ Yes	No WASTEWATER
Is your water system metered?	☐ Yes	□ No	N/A
Total annual metered water use:			N/A
Number of residential users (hookups):			
Number of non-residential users (hookups):			
Current monthly residential charge for 5,000 gallons used:			
Proposed monthly residential charge for 5,000 gallons used:			
Month and year of last rate increase:			
Gross revenues for last fiscal year:			
Gross expenses for last fiscal year:			
9. Proposed Project Cost Estimate (must correspond with	attached prelim	inary engineeri	ng report):
Activity		I	Estimated Cost
a. Construction (Date of cost estimate:	)		
b. Engineering Fees			
c. Construction Inspection (if separate from eng. fees)			
d. Property Acquisition (site, right-of-way, appraisals, etc.)			
e. Legal and Bonding			
f. Other Professional Services			
g. Other (specify):			
h. Contingencies (5% of construction cost)			
i. TOTAL PROJECT COST			
10. Describe evidence that project area or beneficiaries will	meet the incom	e requirements	s of RD or CDBG programs:
• •		•	
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			•
11. Certification:			
The undersigned official of the applicant certifies that the information correct, and complete to the best of my knowledge and belief. The preliminary request and is not a substitute for a full application of the control of the con	The applicant furt to any agency, no	her understands or does it assure	that this project proposal is a funding from any agency.
Name and title of Chief Official:			
Signature of Chief Official:		Date:	